## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandra Virginia 22313-1450 or Fax (571)-273-2885



INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	correspondence includir ed below or directed oth	for transmitting ng the Patent, a nerwise in Bloo	the ISSU advance o ck 1, by (a	UE FEE and PUBLICA rders and notification of a) specifying a new corr	TION FEE (if require maintenance fees wil espondence address; a	ed). Blocks 1 through 5 sh I be mailed to the current ound/or (b) indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for	
	ENCE ADDRESS (Note: Use Bl	ock I for any chang	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
23117	7590 09/08	/2006		na				
NIXON & VANDERHYE, PC 901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203					Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
							(Depositor's name)	
					(Signature)			
					(Date)			
APPLICATION NO. FILING DATE			FIRST NAMED INVENTO	R 42/11/2006	TTORNEY DOCKETING IN	COMFIRMATION NO.		
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR 12/11/2016 HITHRY 12 DOCKET NO. 139 COMPIRMATION NO. 12/11/2016 HITHRY 12/11								
TITLE OF INVENTION: TRANSMISSION OF FILTERING/FILTERED INFORMATION OVER THE IUI THE STATE THE STATE OF THE PROPERTY OF THE PRO								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	DUE	PUBLICATION FEE DUI	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$140	0	\$300	\$0	\$1700	12/08/2006	
EXAMINER ART UNIT			NIT .	CLASS-SUBCLASS				
CONTEE, JOY KIMBERLY 2617				455-436000	_			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
TELEFONAKTIEBOLAGET LM ERICSSON (publ) Stockholm, Sweden								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🔘 Government								
Issue Fee Publication Fee (No small entity discount permitted)				<ul> <li>b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)</li> <li>A check is enclosed.</li> <li>Payment by credit card. Form PTO-2038 is attached.</li> <li>The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 14-1140 (enclose an extra copy of this form).</li> </ul>				
	itus (from status indicate		1.27.	☐ b. Applicant is no lo	nger claiming SMALL	ENTITY status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not lates Patent and	be accepte Trademark	ed from anyone other than c Office.	the applicant; a registe	ered attorney or agent; or the	e assignee or other party in	
Authorized Signature	Misson	Beee	lee	- <del></del>	Date <u>De</u>	cember 8, 2006		
Typed or printed nam	H. Warre	n Burnam	Jr.		Registration No.	. 29,366		
an application. Confiden submitting the complete this form and/or suggest	itiality is governed by 35 d application form to the ions for reducing this bu	U.S.C. 122 and USPTO. Time rden, should be	d 37 CFR will vary sent to th	1.14. This collection is a depending upon the income Chief Information Offi	stimated to take 12 mi ividual case. Any com cer, U.S. Patent and Ti	public which is to file (and inutes to complete, including iments on the amount of tim rademark Office, U.S. Depai SEND TO: Commissioner for	g gathering, preparing, and the you require to complete extract of Commerce, P.O.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.